Application or Docket Number												nber <sub>.</sub>
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									(9 7	7		209
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL I	ENTITY	OFi	OTHER	
TO	OTAL CLAIMS		791					RATE	FEE	7	RATE	FEE ·
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•	9		XS 9=	1	OR	X\$18=	167
INDEPENDENT CLAIMS			minus 3 =		· a		•	X43=	1	OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT						<del> </del>	1		
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=	-	OR	+290=	222
TOTAL										OR	TOTAL	451
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						(Column 3)	_	SMALL	ENTITY	OR	SMALL I	
ENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 29	Minus	<del>-</del> 29		ii .		XS 9=		OR	X\$18=	
	Independent	. 3	Minus	7	<u> </u>	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	,		+290=	
							L	TOTAL	<del> </del>	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								ODIT. FEE		OR	ADDIT. FEE	
AMENDMENT B	·	CLAIMS HIĞHE		ST	(Column 3)			ADDI-	)		ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**				XS 9=		OR	X\$18=	
	Independent	•	Minus	***		a ·		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL		OB	TOTAL	
(Column 1) (Column 2) (Column 3)							A	DDIT. FEE ,			ADDIT. FEE	
	(Column 1)		·	HIGHE	ST	(Column 3)	_		ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		e.		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***	·	=		X43=		ľ	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							//-/0=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, emer "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **OF TOTAL ADDIT. FEE ADDIT. FEE												
		ber Previously Paid					r toun	d in the ap	propriate box	in colu	umn 1.	